Effective on 12/08/2004 Fees pursuant to the Consolidated Appropriation		Complete if Known					
*	Application N	Jumher	09/937.46	09/937,460			
FEE TRANSMI		Filing Date		3/24/2000			
For FY 200		First Named Inventor		Pieter Tjerk Koopman			
7	-1	Examiner Name		Shawn S. An			
Applicant claims small entity status.		Art Unit			· · · · ·		
TOTAL AMOUNT OF PAYMENT	Attorney Doc	ket	<u>2621</u> 3135 - 011614				
TOTAL AMOUNT OF PAYMENT (\$) 65.00 Attorney Docket 3135 - 011614 METHOD OF PAYMENT (check all that apply)							
Check Credit Card Money Order Other (please identify):							
Deposit Account Deposit Account Number: 23-0650 Deposit Account Name:							
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)							
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee							
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 Credit any overpayments							
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.							
FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)							
1. BASIC FILING, SEARCH, AND E	<u> </u>	-					
	FILING FEES SEARCH FEES EXAMINATION						
Small 1	nall Entity				Fees Paid (\$)		
Application Type Fee (\$) Fee			'ee (\$)	Fee (\$)		Fees P	<u>aid (\$)</u>
	2 540	270	220	110			
Design 220 11		50	140	70			
Plant 220 11	10 330	165	170	85			
Reissue 330 16	55 540	270	650	325			
Provisional 220 1	10 0	0	0	0			
2. EXCESS CLAIM FEES							Small Entity
Fee Description Fee (\$)							Fee (\$)
Each claim over 20 (including Reissues) 52							26
Each independent claim over 3 (including					220	110 195	
Multiple dependent claims	-t Claire Fra	. (e) E	(a) Lt-n		ъ.	390 Jultinla D	ependent Claims
<u>Total Claims</u> <u>- 20 or HP</u> <u>E</u>	xtra Claims Fee x	<u>Fee l</u>	<u>Fee Paid (\$)</u> =		<u>1V</u>	Fee (\$)	Fee Paid (\$)
HP = highest number of total claims paid for,							
Indep. Claims -3 or HP E		<u>e (\$) Fee</u>	<u> Paid (\$)</u>				
HP = highest number of independent claims p	aid for, if greater than 3.						
3. APPLICATION SIZE FEE							
If the specification and drawings ex 37 CFR 1.52(e)), the application	n size fee due is \$270 (er (excluding ele \$135 for small en	ctronicall tity) for e	y filed sequent each additional	ce or com l 50 sheets	puter listir or fractio	igs under n thereof.
See 35 U.S.C. 41(a)(1)(G) and 3	37 CFR 1.16(s).						
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$)							Fee Paid (\$)
150 (Totale up to a water number)							
4. OTHER FEE(S) Non English Specification \$120 fee (no small entity discount)							Fees Paid (\$)
Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 1-month Petition for Extension of Time							\$65.00
SUBMITTED BY							
Registration No. (Attorney/Agent) 34,219 Telephone 412-4							12-471-8815
V DIV		(Zittoriit	,,,,,,,	, .	Date	~	nber 11, 2009